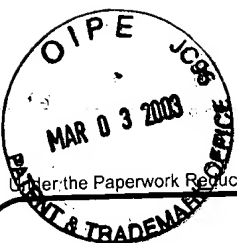


2654 #4



PTO/SB/21 (08-00)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/863,576
	Filing Date	05/23/2001
	First Named Inventor	Lee et al.
	Group Art Unit	
	Examiner Name	
Total Number of Pages in This Submission 4		Attorney Docket Number Technology Center 2600

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<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Request for Withdrawal as Attorney
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John V. Biernacki
Signature	<i>John Biernacki</i>
Date	Feb 25, 2003

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:		
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Signature	<i>Kathie J. Kopczyk</i>	Date February 25, 2003

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT**

Application Number	09/863,576
Filing Date	May 23, 2001
First Named Inventor	Lee et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	

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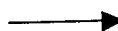
I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

The client has failed to pay one or more bills rendered by the practitioner for an unreasonable period of time.

The undersigned attorney of record has previously notified the applicant of this request, and will do so again by copy of this form.

- ☐ The correspondence address is NOT affected by this withdrawal.
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Zeifman & Company, LLP

Address

Chartered Accountants, 201 Bridgeland Avenue

City

Toronto

State

ZIP

M6A 1Y7

Country

Canada

Telephone

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☒ This request is made on behalf of myself and☒ all the attorneys/agents of record,☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or☐ the attorneys/agents associated with Customer Number

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Date

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Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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